

## APPENDIX B - SERVICES AND STANDARDS

### APPENDIX B-1: DEFINITION OF SERVICES

The State requests that the following home and community-based services, as described and defined herein, be included under this waiver. Provider qualifications/standards for each service are set forth in Appendix B-2.

a.   X   Case Management (Family Support Coordination)

\_\_\_\_\_ Services which will assist individuals who receive waiver services in gaining access to needed waiver and other State plan services, as well as needed medical, social, educational and other services, regardless of the funding source for the services to which access is gained.

Case managers shall be responsible for ongoing monitoring of the provision of services included in the individual's plan of care.

1. \_\_\_\_\_ Yes                      2. \_\_\_\_\_ No

Case managers shall initiate and oversee the process of assessment and reassessment of the individual's level of care and the review of plans of care at such intervals as are specified in Appendices C & D of this request.

1. \_\_\_\_\_ Yes                      2. \_\_\_\_\_ No

      X       Other Service Definition (Specify):

Family Support Coordination:

Services whereby an employee of an organized health care delivery system or other qualified provider under contract with the department is responsible for locating,

coordinating, supervising and monitoring Family Support services to individuals aged 0 through 21 with developmental disabilities. More specifically, Family Support Coordination includes:

1. Providing ongoing monitoring of the recipient's services, intervening when necessary to ensure that the individual's living situation continues to be healthy and safe, and that his or her needs continue to be met;
2. Conducting periodic assessments of risk in order to ensure that the Family Support arrangement is appropriate and safe given the individual's unique abilities and needs;
3. Assessing the individual to determine the resources and services needed to carry out the individual plan;
4. Developing, monitoring, and recording written plans of care in a way the individual, his care giver, and others understand;
5. Meeting frequently with the individual, and others, regarding the adequacy of the plan of care, how well the plan is being implemented, and changes which may be necessary in the plan;
6. Teaching the individual and his care giver skills which will enable them to independently locate and establish contact with agencies who can assist them in securing the services they require, thereby allowing them to become less reliant on the service system, generally, and intensive support coordination, specifically;
7. Facilitating interaction between people working in resource systems;
8. Mobilizing and using "natural helping networks" such as family members, church members and friends;
9. Providing pre-service and in-service training to those people providing habilitation, personal care, or other services to the recipient. Training would include general orientation as well as training specific to the needs of the individual and how best to meet those needs;
10. Managing personal as well as cost plan dollars to ensure that personal and service needs are being met, and that funds are efficiently utilized and accurately reported;
11. Locating and arranging for suitable high quality housing, when necessary;

12. Providing for adequate supervision of the individual during the day, evening, and weekend;
13. Hiring and supervising qualified staff to provide Family Support services. Family Support Coordination is responsible, with input from the individual and his care giver, for hiring and supervising direct service providers;
14. Arranging for the purchase of services required by the plan of care. Where services are purchased for the individual, he or she is free to choose between available qualified providers.

Family Support Coordination is responsible for requiring documentation of the service provided and for approving payment to direct service providers.

Note- Recipients of adult services (ages 16 and up) are entitled to State Plan Targeted Case Management. Under no circumstances are case management services duplicated for individuals receiving Department-funded services.

b.   x   Homemaker:

           Services consisting of general household activities (meal preparation and routine household care) provided by a trained homemaker, when the individual regularly responsible for these activities is temporarily absent or unable to manage the home and care for him or herself or others in the home. Homemakers shall meet such standards of education and training as are established by the State for the provision of these activities.

  x   Other Service Definition (Specify):

Homemaker services consist of general household activities provided by a homemaker when the person regularly responsible for these activities is unable to manage the home and care for himself/herself or others in the home, or is engaged in providing habilitation and support services to the individual with disabilities.

Services in this program include meal preparation, cleaning, simple household repairs, laundry, shopping for food and supplies and routine household care.

Homemaker services are not available under the State Plan.

c.        Home Health Aide services:

\_\_\_\_ Services defined in 42 CFR 440.70, with the exception that limitations on the amount, duration and scope of such services imposed by the State's approved Medicaid plan shall not be applicable. The amount, duration and scope of these services shall instead be in accordance with the estimates given in Appendix G of this waiver request. Services provided under the waiver shall be in addition to any available under the approved State plan.

\_\_\_\_ Other Service Definition (Specify):

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d.   x   Personal care services:

\_\_\_\_ Assistance with eating, bathing, dressing, personal hygiene, activities of daily living. This services may include assistance with preparation of meals, but does not include the cost of the meals themselves. when specified in the plan of care, this service may also include such housekeeping chores as bedmaking, dusting and vacuuming, which are incidental to the care furnished, or which are essential to the health and welfare of the individual, rather than the individual's family. Personal care providers must meet State standards for this service.

1. Services provided by family members (Check one):

  x   Payment will not be made for personal care services furnished by a member of the individual's family.

\_\_\_\_ Personal care providers may be members of the individual's family. Payment will not be made for services furnished to a minor by the child's parent (or step-parent), or to an individual by that person's spouse.

Justification attached. (Check one):

\_\_\_\_ Family members who provide personal care services must meet the same standards as providers who are unrelated to the individual.

\_\_\_ Standards for family members providing personal care services differ from those for other providers of this service. The different standards are indicated in Appendix B-2.

2. Supervision of personal care providers will be furnished by (Check all that apply):

  x   A registered nurse, licensed to practice nursing in the State.

\_\_\_ A licensed practical or vocational nurse, under the supervision of a registered nurse, as provided under State law.

\_\_\_ Case managers

\_\_\_ Other (Specify):

\_\_\_\_\_  
\_\_\_\_\_

3. Frequency or intensity of supervision (Check one):

  x   As indicated in the plan of care

\_\_\_ Other (Specify):

\_\_\_\_\_

\_\_\_\_\_  
4. Relationship to State plan services (Check one):

\_\_\_ Personal care services are not provided under the approved State plan.

\_\_\_ Personal care services are included in the State plan, but with limitations. The waived service will serve as an extension of the State plan service, in accordance with documentation provided in Appendix G of this waiver request.

<u>x</u>	Personal care services under the State plan differ in service definition or provider type from the services to be offered under the waiver.
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     Other service definition (Specify):

Personal Care Services Include:

1. Assistance with personal hygiene, dressing, eating and ambulatory needs of the individual; and
2. Performance of household tasks incidental to the person's health care needs or otherwise necessary to contribute to maintaining the individual at home;
3. Supervision for health and safety reasons.

e. x Respite care:

\_\_\_\_\_ Services provided to individuals unable to care for themselves; furnished on a short-term basis because of the absence or need for relief of those persons normally providing the care.

          Other service definition (Specify):

\_\_\_\_\_Respite Care Services:

Respite care includes any services (e.g., traditional respite hours, recreation or leisure activities for the recipient and care giver; summer camp) designed to meet the safety and daily care needs of the recipient and the needs of the recipient's care giver in relation to reducing stress generated by the provision of constant care to the individual receiving waiver services. These services are selected in collaboration with the parents and are provided by persons chosen and trained by the family. Persons providing respite services will be in compliance with all state and federal respite standards. Respite services are delivered in conformity with an individualized plan of care.

The amount and frequency of respite care (with the exception of emergencies) is included in each individual's plan of care.

FFP will not be claimed for the cost of room and board except when provided as part of respite care furnished in a facility approved by the State that is not a private residence.

Respite care will be provided in the following location(s) (Check all that apply):

- ☒ Individual's home or place of residence
- ☒ Foster home
- ☒ Medicaid certified Hospital
- ☒ Medicaid certified NF
- ☐ Medicaid certified ICF/MR
- ☒ Group home
- ☐ Licensed respite care facility
- ☐ Other community care residential facility approved by the State that its not a private residence (Specify type):
- \_\_\_\_\_
- \_\_\_\_\_

\_\_\_\_\_ Other service definition (Specify):

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f. \_\_\_\_\_ Adult day health:

- ☐ Services furnished 4 or more hours per day on a regularly scheduled basis, for one or more days per week, in an outpatient setting, encompassing both health and social services needed to ensure the optimal functioning of the individual. Meals provided as part of these services shall not constitute a "full nutritional regimen" (3 meals per day). Physical, occupational and speech therapies indicated in the individual's plan of care will be furnished as component parts of this service.

Transportation between the individual's place of residence and the adult day health center will be provided as a component part of adult day health services. The cost of this transportation is included in the rate paid to providers of adult day health services. (Check one):

1. ☐ Yes

2. ☐ No

☐ Other service definition (Specify):

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 Qualifications of the providers of adult day health services are contained in Appendix B-2.

g. ☒ Habilitation:

☒ Services designed to assist individuals in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. This service includes:

\_\_\_\_\_  
 Residential habilitation: assistance with acquisition, retention, or improvement in skills related to activities of daily living, such as personal grooming and cleanliness, bed making and household chores, eating and the preparation of food, and the social and adaptive skills necessary to enable the individual to reside in a non-institutional setting. Payments for residential habilitation are not made for room and board, the cost of facility maintenance, upkeep and improvement, other than such costs for modifications or adaptations to a facility required to assure the health and safety of residents, or to meet the requirements of the applicable life safety code. Payment for residential habilitation does not include payments made, directly or indirectly, to members of the individual's immediate family. Payments will not be made for the routine care and supervision which would be expected to be provided by a family or group home provider, or for activities or supervision for which a payment is made by a source other than Medicaid. Documentation which shows that Medicaid payment does not cover these components is attached to Appendix G.



- \_\_\_\_ Day habilitation: assistance with acquisition, retention, or improvement in self-help, socialization and adaptive skills which takes place in a non-residential setting, separate from the home or facility in which the individual resides. Services shall normally be furnished 4 or more hours per day on a regularly scheduled basis, for 1 or more days per week unless provided as an adjunct to other day activities included in an individual's plan of care.

Day habilitation services shall focus on enabling the individual to attain or maintain his or her maximum functional level and shall be coordinated with any physical, occupational, or speech therapies listed in the plan of care. In addition, day habilitation services may serve to reinforce skills or lessons taught in school, therapy, or other settings.

- \_\_\_\_ Prevocational services not available under a program funded under section 110 of the Rehabilitation Act of 1973 or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)). Services are aimed at preparing an individual for paid or unpaid employment, but are not job-task oriented. Services include teaching such concepts as compliance, attendance, task completion, problem solving and safety. Prevocational services are provided to persons not expected to be able to join the general work force or participate in a transitional sheltered workshop within one year (excluding supported employment programs).

Prevocational services are available only to individuals who have previously been discharged from a SNF, ICF, NF or ICF/MR.

Check one:

\_\_\_\_\_ Individuals will not be compensated for prevocational services.

\_\_\_\_ When compensated, individuals are paid at less than 50 percent of the minimum wage.

Activities included in this service are not primarily directed at teaching specific job skills, but at underlying habilitative goals, such as attention span

and motor skills. All prevocational services will be reflected in the individual's plan of care as directed to habilitative, rather than explicit employment objectives.

Documentation will be maintained in the file of each individual receiving this service that:

1. The service is not otherwise available under a program funded under the Rehabilitation Act of 1973, or P.L. 94-142; and
2. The individual has been deinstitutionalized from a SNF, ICF, NF, or ICF/MR at some prior period.

\_\_\_\_ Educational services, which consist of special education and related services as defined in sections (15) and (17) of the Individuals with Disabilities Education Act, to the extent to which they are not available under a program funded by IDEA. Documentation will be maintained in the file of each individual receiving this service that:

1. The service is not otherwise available under a program funded under the Rehabilitation Act of 1973, or P.L. 94-142; and
2. The individual has been deinstitutionalized from a SNF, ICF, NF, or ICF/MR at some prior period.

\_\_\_\_ Supported employment services, which consist of paid employment for persons for whom competitive employment at or above the minimum wage is unlikely, and who, because of their disabilities, need intensive ongoing support to perform in a work setting.

Supported employment is conducted in a variety of settings, particularly work sites in which persons without disabilities are employed. supported employment includes activities needed to sustain paid work by individuals receiving waiver services, including supervision and training. When supported employment services are provided at a work site in

which persons without disabilities are employed, payment will be made only for the adaptations, supervision and training required by individuals receiving waiver services as a result of their disabilities, and will not include payment for the supervisory activities rendered as a normal part of the business setting.

Supported employment services furnished under the waiver are not available under a program funded by either the Rehabilitation Act of 1973 or P.L. 94-142. Documentation will be maintained in the file of each individual receiving this service that:

1. The service is not otherwise available under a program funded under the Rehabilitation Act of 1973, or P.L. 94-142; and
2. The individual has been deinstitutionalized from a SNF, ICF, NF, or ICF/MR at some prior period.

FFP will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses such as the following:

1. Incentive payments made to an employer to encourage or subsidize the employer's participation in a supported employment program;
2. Payments that are passed through to users of supported employment programs; or
3. Payments for vocational training that is not directly related to an individual's supported employment program.

Transportation will be provided between the individual's place of residence and the site of the habilitation services, or between

habilitation sites (in cases where the individual receives habilitation services in more than one place) as a component part of habilitation services. The cost of this transportation is included in the rate paid to providers of the appropriate type of habilitation services.

1. \_\_\_ Yes

2. \_\_\_ No

  x   Other service definition (Specify):

1. Residential Habilitation

Habilitation provided to an individual wherever he or she may live. Settings may include foster homes, group homes, congregate and non-congregate living apartments and natural homes.

All facilities covered by Section 1616(e) of the Act comply with State licensing standards that meet the requirements of 45 CFR Part 1397.

Board and room is not a covered service. Individuals served are responsible for paying for board and room through other funding sources such as Supplemental Security Income (SSI).

The individual plan of care, based upon the results of a formal assessment and identification of needs, provides the general goals and specific objectives toward which training efforts are directed. The individual plan of care (Individual Plan or Family Service Plan) also specifies the appropriate residential setting in which services will be provided.

Training is provided in basic self-help skills, home and community living skills, leisure and social skills. Support is provided as necessary for the care of the individual. Each training objective is specified in the plan of care (IP), it is clearly related to the individual's long term goal and is not simply busywork or diversional in nature.

2. Day Habilitation

Habilitation provided in day programs includes support and functional training in use of community services, basic life skills, appropriate behaviors for the workplace and appropriate social behaviors.

Habilitation services do not include special education and related services (as

defined in Section 4(a)(4) of the 1975 Amendments to the Education of the Handicapped Act (20 U.S.C. 1401(16), (17)) which otherwise are available to the individual through a State or local educational agency and vocational rehabilitation services which otherwise are available to the individual through a program funded under Section 110 of the Rehabilitation Act of 1973 (29 U.S.C. 730).

The individual plan of care (IP), based upon the results of a formal assessment and identification of needs, provides the general goals and specific objectives toward which training efforts are directed.

Work/day programs offer individualized services based on the support needs of service recipients. Persons served in work/day settings may include persons with pre-vocational skill training needs, persons who function as elderly with skill maintenance and social/leisure activity needs and persons with very significant behavioral, self-help or medical challenges who require enriched staffing ratios to meet habilitation and support goals. In some cases, individuals with varying services needs may be served under one roof, with staffing ratios and habilitation goals individualized to meet the needs of the recipients. Work/day programs offer one or more services conforming with the following criteria:

- \* Pre-vocational services are oriented toward providing training to individuals who are not expected to join the general work force in the immediate future (i.e., within a year).

Pre-vocational services include support and training in self-help skills, motor and physical development, communication skills, functional academics, community life skills, work skills, and leisure skills. These training areas are not primarily directed at teaching specific job skills but at underlying habilitative goals.

If individuals are compensated for the work they do, the compensation is less than 50 percent of the minimum wage.

- \* Senior day services provide health services, social services, training and supervision based on the needs of the individuals served. Senior day services entail services which provide supports and specific functional training based on an Individual Plan (IP).

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These services are provided to older individuals whose plans of care (IP) direct training efforts and specify supports that will enable them to participate in a variety of age-appropriate activities supporting the goal of maintaining the individual's ability to function in the community and to avoid institutionalization.

- \* Intensive adult habilitation programs are oriented toward serving individuals with more severe disabilities. These individuals display fewer self-help skills

and/or more severe problem behaviors than the individuals found in typical work activity centers or sheltered workshops. They have been screened using an "intensive needs assessment" instrument and have been determined as inappropriate for placement in less restrictive adult settings.

Training and support is provided in a highly structured environment, by staff who are sophisticated in the skills of behavior management. Training focuses on the behaviors necessary to maintain the individual in the community-based service system and, if possible, move to a less restrictive setting.

### 3. Supported Employment

Supported employment is for persons with developmental disabilities who, because of their disabilities, need intensive ongoing support to perform in a work setting.

Supported employment provides the opportunity to: work for pay in regular employment; integrate with non-disabled persons who are not paid care givers; and receive long-term support services in order to retain the employment. The service is designed for individuals with developmental disabilities facing severe impediments to employment due to the nature and complexity of their disabilities.

Supported employment may include the following types of activities designed to assist eligible individuals to access and maintain employment:

#### a. Pre-placement activities

Pre-placement activities consist of gathering information, conducting employee assessment and completing any steps necessary to implement the job placement process.

#### b. Job Market Analysis/Job Development

Job market analysis and job development involve identifying and locating potential jobs.

#### c. Job Match/Screening

Job match and screening involves establishing job requirements and selecting/matching potential employees to jobs.

#### d. Job Placement/Training

Training is directed toward development of all the skills necessary to

succeed in the particular paid job that the individual is hired to do. Training occurs within the actual job environment and addresses naturally occurring demands and contingencies. The trainer assists the employee in completing the job until all the tasks can be performed at the standard established by the employer.

e. Ongoing Assessment and Support and Service Coordination

Ongoing assessment and support involves monitoring the status of the job environment and the employee, and providing interventions as needed to maintain job placement.

f. Transportation

Transportation of a work crew and its equipment to and from the job site may be provided.

Supported employment will be funded under the waiver when not available under Section 110 of the Rehabilitation Act of 1973, as amended, (19 U.S.C. 730).

The State requests the authority to provide the following additional services, not specified in the statute. The State assures that each service is cost-effective and necessary to prevent institutionalization. The cost neutrality of each service is demonstrated in Appendix G. Qualifications of providers are found in Appendix B-2.

h.   x   Environmental accessibility adaptations (Environmental Modifications/Adaptive Equipment):

— Those physical adaptations to the home, required by the individual's plan of care, which are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home, and without which, the individual would require institutionalization. Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems which are necessary to accommodate the medical equipment and supplies which are necessary for the welfare of the individual.

Excluded are those adaptations or improvements to the home which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc. Adaptations which add to the total square footage of the home are excluded

from this benefit. All services shall be provided in accordance with applicable State or local building codes.

  x   Other service definition (Specify):

#### Environmental Modifications/Adaptive Equipment:

##### Environmental Modifications:

Those physical adaptations to the home, required by the individual's plan of care, which are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home, and without which, the individual would require institutionalization. Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems which are necessary to accommodate the medical equipment and supplies which are necessary for the welfare of the individual.

In addition to the above, environmental modifications services are measures that provide the recipient with accessibility and safety in the environment so as to maintain or improve the ability of the recipient to remain in community settings and employment.

Environmental modifications may be made to a recipient's home or vehicle (wheelchair lift, wheelchair lock down devices, adapted driving controls, etc) for the purpose of increasing independent functioning and safety or to enable family members or other care givers to provide the care required by the recipient. An environmental modification provided to a recipient must:

- (a) relate specifically to and be primarily for the recipient's disability;
- (b) have utility primarily for a person who has a disability;
- (c) not be an item or modification that a family would normally be expected to provide for a non-disabled family member;
- (d) not be in the form of room and board or general maintenance;
- (e) meet the specifications, if applicable, for the modification set by the American national standards institute (ANSI).
- (f) be prior authorized jointly by the provider's board of directors and the department if the cost of the project may exceed \$4,000.

Excluded are those adaptations or improvements to the home which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc. Adaptations which add to the total square footage of the home are excluded from this benefit. All services shall be provided in accordance with applicable State or local building codes.



**Adaptive Equipment:**

Adaptive equipment necessary to obtain and retain employment or to increase independent functioning in completing activities of daily living when such equipment is not available through other sources may be provided. Adaptive equipment as needed to enable family members or other care givers to provide the care needed by the individual.

A comprehensive list is not possible because sometimes items are created (invented) to meet the unique adaptive needs of the individual, for example, an adult-sized "changing table" to enable a care giver to diaper and dress a person who has severe physical limitations; or specially designed switches that an individual with physical limitations can use to accomplish other tasks. Adaptive equipment will conform to the following criteria:

- (a) relate specifically to and be primarily for the recipient's disability;
- (b) have utility primarily for a person who has a disability;
- (c) not be an item or modification that a family would normally be expected to provide for a non disabled family member;
- (d) not be in the form of room and board or general maintenance;
- (e) meet the specifications, if applicable, for the modification set by the American national standards institute (ANSI).
- (f) be prior authorized jointly by the provider's board of directors and the department if the cost of the project may exceed \$4,000.

i.        Skilled nursing:

       Services listed in the plan of care which are within the scope of the State's Nurse Practice Act and are provided by a registered professional nurse, or licensed practical or vocational nurse under the supervision of a registered nurse, licensed to practice in the State.

       Other service definition (Specify):

j.   x   Transportation:

  x   Service offered in order to enable individuals served on the waiver to gain access to waiver and other community services, activities and resources, specified by the plan of care. This service is offered in addition to medical transportation required under 42 CFR 431.53 and transportation services under the State plan, defined at 42 CFR 440.170(a) (if applicable), and shall

not replace them. Transportation services under the waiver shall be offered in accordance with the individual's plan of care. Whenever possible, family, neighbors, friends, or community agencies which can provide this service without charge will be utilized.

\_\_\_ Other service definition (Specify):

k. \_\_\_ Specialized Medical Equipment and Supplies:

\_\_\_ Specialized medical equipment and supplies to include devices, controls, or appliances, specified in the plan of care, which enable individuals to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live.

This service also includes items necessary for life support, ancillary supplies and equipment necessary to the proper functioning of such items, and durable and non-durable medical equipment not available under the Medicaid State plan. Items reimbursed with waiver funds shall be in addition to any medical equipment and supplies furnished under the State plan and shall exclude those items which are not of direct medical or remedial benefit to the individual. All items shall meet applicable standards of manufacture, design and installation.

\_\_\_ Other service definition (Specify):

l. \_\_\_ Chore services:

\_\_\_ Services needed to maintain the home in a clean, sanitary and safe environment. This service includes heavy household chores such as washing floors, windows and walls, tacking down loose rugs and tiles, moving heavy items of furniture in order to provide safe access and egress. These services will be provided only in cases where neither the individual, nor anyone else in the household, is capable of performing or financially providing for them, and where no other relative, caregiver, landlord, community/volunteer agency, or third party payor is capable of or responsible for their provision. In the case of rental property, the responsibility of the landlord, pursuant to the lease agreement, will be examined prior to any authorization of service.

\_\_\_ Other service definition (Specify):

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m. \_\_\_ Personal Emergency Response Systems (PERS)

\_\_\_ PERS is an electronic device which enables certain individuals at high risk of institutionalization to secure help in an emergency. The individual may also wear a portable "help" button to allow for mobility. The system is connected to the person's phone and programmed to signal a response center once a "help" button is activated. The response center is staffed by trained professionals, as specified in Appendix B-2. PERS services are limited to those individuals who live alone, or who are alone for significant parts of the day, and have no regular caregiver for extended periods of time, and who would otherwise require extensive routine supervision.

\_\_\_ Other service definition (Specify):

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n. \_\_\_ Adult companion services:

\_\_\_ Non-medical care, supervision and socialization, provided to a functionally impaired adult. Companions may assist or supervise the individual with such tasks as meal preparation, laundry and shopping, but do not perform these activities as discrete services. The provision of companion services does not entail hands-on nursing care. Providers may also perform light housekeeping tasks which are incidental to the care and supervision of the individual. This service is provided in accordance with a therapeutic goal in the plan of care, and is not purely diversional in nature.

\_\_\_ Other service definition (Specify):

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o.   x   Private duty nursing:

\_\_\_ Individual and continuous care (in contrast to part time or intermittent care) provided by licensed nurses within the scope of State law. These services are provided to an individual at home.

x   Other service definition (Specify):

This service is to provide medically necessary nursing services to individuals when these services exceed the established Medicaid limits or are different from the service provided under the State Plan. They will be provided where they are needed, whether in the home or in the individual's day activity setting.

Services may include medical management, direct treatment, consultation, and training for the individual and/or his care givers.

Nursing services provided under the home health requirement of the State Plan are limited and are only available to individuals considered "home bound" and in need of acute nursing care. Nursing services other than direct treatment are not available through a home health agency. Waiver recipients, particularly those coming out of the state's ICF's/MR, may be quite medically involved. State Plan nursing services may only be provided in group homes or other places of residence, while some waiver beneficiaries need nursing services in day programs or otherwise outside the home. Nursing homes are no longer service options for the vast majority of people with developmental disabilities.

Nursing services must be specified in the plan of care. It must be ordered in writing by the individual's physician and it must be delivered by a registered nurse (RN) or a licensed practical nurse (LPN). Waiver nursing services will be used after the home health nursing limits have been reached, or if the service required is different from that authorized under the State Plan.

## p.\_\_\_\_ Family training:

\_\_\_\_ Training and counseling services for the families of individuals served on this waiver. For purposes of this service, "family" is defined as the persons who live with or provide care to a person served on the waiver, and may include a parent, spouse, children, relatives, foster family, or in-laws. "Family" does not include individuals who are employed to care for the consumer. Training includes instruction about treatment regimens and use of equipment specified in the plan of care, and shall include updates as necessary to safely maintain the individual at home. All family training must be included in the individual's written plan of care.

\_\_\_\_ Other service definition (Specify):

## q.\_\_\_\_ Attendant care services:

- \_\_\_\_ Hands-on care, of both a supportive and health-related nature, specific to the needs of a medically stable, physically handicapped individual. Supportive services are those which substitute for the absence, loss, diminution, or impairment of a physical or cognitive function. this service may include skilled or nursing care to the extent permitted by State law. Housekeeping activities which are incidental to the performance of care may also be furnished as part of this activity.

Supervision (Check all that apply):

- \_\_\_\_ Supervision will be provided by a Registered Nurse, licensed to practice in the State. The frequency and intensity of supervision will be specified in the individual's written plan of care.
- \_\_\_\_ Supervision may be furnished directly by the individual, when the person has been trained to perform this function, and when the safety and efficacy of consumer-provided supervision has been certified in writing by a registered nurse or otherwise as provided in State law. This certification must be based on direct observation of the consumer and the specific attendant care provider, during the actual provision of care. Documentation of this certification will be maintained in the consumer's individual plan of care.

- \_\_\_\_ Other supervisory arrangements (Specify):

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- \_\_\_\_ Other service definition (Specify):

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- r. \_\_\_\_ Adult Residential Care (Check all that apply):

- \_\_\_\_ Adult foster care: Personal care and services, homemaker, chore, attendant care and companion services medication oversight (to the extent permitted under State law) provided in a licensed (where applicable) private home by

a principal care provider who lives in the home. Adult foster care is furnished to adults who receive these services in conjunction with residing in the home. the total number of individuals (including persons served in the waiver) living in the home, who are unrelated to the principal care provider, cannot exceed\_\_\_). Separate payment will not be made for homemaker or chore services furnished to an individual receiving adult foster care services, since these services are integral to and inherent in the provision of adult foster care services.

\_\_\_ Assisted living: Personal care and services, homemaker, chore, attendant care, companion services, medication oversight (to the extent permitted under State law), therapeutic social and recreational programming, provided in a home-like environment in a licensed (where applicable) community care facility, in conjunction with residing in the facility. This service includes 24 hour on-site response staff to meet scheduled or unpredictable needs in a way that promotes maximum dignity and independence, and to provide supervision, safety and security. Other individuals or agencies may also furnish care directly, or under arrangement with the community care facility, but the care provided by these other entities supplements that provided by the community care facility and does not supplant it. Personalized care is furnished to individuals who reside in their own living units (which may include dually occupied units when both occupants consent to the arrangement) which may or may not include kitchenette and/or living rooms and which contain bedrooms and toilet facilities. The consumer has a right to privacy. Living units may be locked at the discretion of the consumer, except when a physician or mental health professional has certified in writing that the consumer is sufficiently cognitively impaired as to be a danger to self or others if given the opportunity to lock the door. (This requirement does not apply where it conflicts with fire code.) Each living unit is separate and distinct from each other. The facility must have a central dining room, living room or parlor, and common activity center(s) (which may also serve as living rooms or dining rooms). The consumer retains the right to assume risk, tempered only by the individual's ability to assume responsibility for that risk. Care must be furnished in a way which fosters the independence of each consumer to facilitate aging in place. Routines of care provision and service delivery must be consumer-driven to the maximum extent possible, and treat each person with dignity and respect.

Assisted living services may also include (Check all that apply):

\_\_\_ Home health care

- ☐ Physical therapy
- ☐ Occupational therapy
- ☐ Speech therapy
- ☐ Medication administration
- ☐ Intermittent skilled nursing services
- ☐ Transportation specified in the plan of care
- ☐ Periodic nursing evaluations

Other (Specify)

However, nursing and skilled therapy services (except periodic nursing evaluations if specified above) are incidental, rather than integral to the provision of assisted living services. Payment will not be made for 24-hour skilled care or supervision. FFP is not available in the cost of room and board furnished in conjunction with residing in an assisted living facility.

☐ Other service definition (Specify):

Payments for adult residential care services are not made for room and board, items of comfort or convenience, or the costs of facility maintenance, upkeep and improvement. Payment for adult residential care services does not include payments made, directly or indirectly, to members of the consumer's immediate family. The methodology by which payments are calculated and made is described in Appendix G.

s. ☒ Other waiver services which are cost-effective and necessary to prevent institutionalization (Specify):

Respiratory Services.

These services are provided by a licensed respiratory therapist and may include direct treatment to the individual, ongoing assessment of the person's medical conditions, equipment monitoring and upkeep, and pulmonary education and rehabilitation. Without these services, individuals with severe pulmonary conditions would have to be institutionalized.

#### Dietitian Services:

These services provided by a registered dietitian or a licensed nutritionist include meal planning, consultation with and training for care givers, and education for the individual served. The service does not include the cost of meals. Dietitian Services are not available under Montana's State Plan.

#### Meals Services:

This service provides hot or other appropriate meals once or twice a day, up to seven days a week. A full nutritional regimen (three meals per day) will not be provided, in keeping with the exclusion of room and board as covered services.

Some individuals need special assistance with their diets and the special meals service can help ensure that these individuals would receive adequate nourishment. This service will only be provided to individuals who are not eligible for these services under any other source, or need different or more extensive services than are otherwise available.

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#### t. x Extended State Plan Services:

The following services, available through the approved State plan, will be provided, except that the limitations on amount, duration and scope specified in the plan will not apply. Services will be as defined and described in the approved State plan. The provider qualifications listed in the plan will apply, and are hereby incorporated into this waiver request by reference. These services will be provided under the State plan until the plan limitations have been reached.

Documentation of the extent of services and cost-effectiveness are demonstrated in Appendix G. (Check all that apply):

\_\_\_ Physician services

\_\_\_ Home health care services



x   Physical therapy services

## Physical Therapy Services:

These services will be provided through direct contact between therapist and waiver recipient as well as between the therapist and other people providing services to the individual. Physical therapists may provide treatment training programs that are designed to:

1. Preserve and improve abilities for independent function, such as range of motion, strength, tolerance, coordination and activities of daily living; and
2. Prevent, insofar as possible, irreducible or progressive disabilities through means such as the use of orthotic prosthetic appliances, assistive and adaptive devices, positioning, behavior adaptations and sensory stimulation.

Therapists will also provide consultation and training to staff or caregivers who work directly with waiver recipients.

Physical therapy services under the State Plan are limited. Maintenance therapy is not reimbursable, nor is participation in the interdisciplinary planning process.

  x   Occupational therapy services

## Occupational Therapy Services:

These services will be provided through direct contact between therapist and waiver recipient as well as between the therapist and other people providing services to the individual.

Occupational therapists may provide evaluation, consultation, training and treatment.

Occupational therapy services under the State Plan are limited. Maintenance therapy is not reimbursable, nor is participation in the interdisciplinary planning process.

  x   Speech, hearing and language services       Speech Therapy Services:

These services will be provided through direct contact between therapist and waiver recipient as well as between the therapist and other people providing services to the

individual.

Speech therapy services may include:

1. Screening and evaluation of individuals with respect to speech and hearing functions;
2. Comprehensive speech and language evaluations when indicated by screening results;
3. Participation in the continuing interdisciplinary evaluation of individuals for purposes of beginning, monitoring and following up on individualized habilitation programs; and
4. Treatment services as an extension of the evaluation process, which include:

Consultation with appropriate people involved with the individual for speech improvement and speech education activities to design specialized programs for developing each individual's communication skills in comprehension, including speech, reading, auditory training, and skills in expression.

Therapists will also provide training to staff and caregivers who work directly with waiver recipients.

Speech therapy services under the State Plan are limited. Maintenance therapy is not reimbursable, nor is participation in the interdisciplinary planning process.

\_\_\_\_\_ Prescribed drugs

  x   Other State plan services (Specify):

\_\_\_\_\_   x   Psychological Services

\_\_\_\_\_ Psychological Services:

Psychological services are those services provided by a licensed clinical psychologist or licensed professional counselor which are within the scope of the practices of their respective professions.

Psychological services may include individual and group therapy; consultation with providers and care givers directly involved with the individual; development and monitoring of behavior programs; participation in the individual planning process; and

counseling for primary care givers (i.e., family members and foster parents) when their needs are related to problems dealing with the child with the disability. Psychological services under the managed care contract will be used before billing the waiver. Psychological services under the State Plan are limited.

u.\_\_\_\_ Services for individuals with chronic mental illness, consisting of (Check one):

\_\_\_\_ Day treatment or other partial hospitalization services (Check one):

\_\_\_\_ Services that are necessary for the diagnosis or treatment of the individual's mental illness. These services consist of the following elements:

- a. individual and group therapy with physicians or psychologists (or other mental health professionals to the extent authorized under State law),
- b. occupational therapy, requiring the skills of a qualified occupational therapist,
- c. services of social workers, trained psychiatric nurses, and other staff trained to work with individuals with psychiatric illness,
- d. drugs and biologicals furnished for therapeutic purposes,
- e. individual activity therapies that are not primarily recreational or diversionary,
- f. family counseling (the primary purpose of which is treatment of the individual's condition),
- g. training and education of the individual (to the extent that training and educational activities are closely and clearly related to the individual's care and treatment), and
- h. diagnostic services.

Meals and transportation are excluded from reimbursement under this service. The purpose of this service is to maintain the individual's condition and functional level and to prevent relapse or hospitalization.

\_\_\_\_ Other service definition (Specify):

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\_\_\_\_ Psycho-social rehabilitation services (Check one):

\_\_\_\_ Medical or remedial services recommended by a physician or other licensed practitioner under State law, for the maximum reduction of physical or mental disability and the restoration of maximum functional level. Specific psychosocial rehabilitation services include the following:

- a. restoration and maintenance of daily living skills (grooming, personal hygiene, cooking, nutrition, health and mental health education, medication management, money management and maintenance of the living environment);
- b. social skills training in appropriate use of community services;
- c. development of appropriate personal support networks, therapeutic recreational services (which are focused on therapeutic intervention, rather than diversion); and
- d. telephone monitoring and counseling services.

The following are specifically excluded from Medicaid payment for psychosocial rehabilitation services:

- a. vocational services,
- b. pre-vocational services,

c. supported employment services, and

d. room and board.

\_\_\_\_ Other service definition (Specify):

\_\_\_\_ Clinic services (whether or not furnished in a facility) are services defined in 42 CFR 440.90.

Check one:

\_\_\_\_ This service is furnished only on the premises of a clinic.

\_\_\_\_ Clinic services provided under this waiver may be furnished outside the clinic facility. Services may be furnished in the following locations (Specify):

\_\_\_\_\_  
\_\_\_\_\_

**APPENDIX B-2****PROVIDER QUALIFICATIONS****A. LICENSURE AND CERTIFICATION CHART**

The following chart indicates the requirements for the provision of each service under the waiver. Licensure, Regulation, State Administrative Code are referenced by citation. Standards not addressed under uniform State citation are attached.

Service	Provider	License	Certification	Other Standard
<u>Homemaker</u>	The individual providing this service will be an employee of a legal business entity, or an employee of qualified provider agency contracting with the Department. Payments for service will be made by the agency contracting with the Department.	Workers who are employees of legal business that are licensed, bonded and insured to deliver professional home maker services, or the agency is a qualified provider contracting directly with the Department.	N/A	ARM 37.34.929 ARM 37.34.930 Qualifications of the person providing the homemaker service will be reviewed and approved by the contracting agency and the service recipient and family, if applicable. The family or recipient can request the agency contracting with the Department to complete a criminal background check if the person providing the homemaker service is not an agency employee, at no cost to the family or recipient.

<u>Personal Care</u>	The direct care staff person will be an employee of the qualified provider or legal entity contracting with the Department, or will be an employee of an enrolled State Plan Medicaid provider of personal care services.	Workers will be employees of agencies that are licensed, bonded and insured to deliver professional personal care services, or the agency is a qualified provider contracting directly with the Department.	N/A	ARM 37.34.933 ARM 37.34.934 For employees of agencies contracting directly with the Department, the DDP QIS (QMRP) will verify the individual has received training within 30 days of hire including: abuse reporting, incident reporting, client rights, client confidentiality and first aid training, CPR training and any specialty training relating to the needs of individual served, as outlined in the plan of care. Persons assisting with meds will be certified according to rule. In addition, the employer will maintain documentation verifying the person providing direct client services has an acceptable criminal background check.
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<u>Respite</u>	The respite worker will be an employee of the qualified provider agency or an employee of an enrolled Medicaid provider, or a person who meets the service standards who has a written agreement with a provider designated as an OHCDS by the Department.	N/A	N/A	<p>ARM 37.34.946 ARM 37.34.947</p> <p>In addition, the respite provider is subject to approval by the family, and must possess any competencies outlined by the family in the plan of care which are related to the specific needs of the individual. Person providing the service must be 16 or older. The family or recipient can request the agency contracting with the Department to complete a criminal background check if the respite worker is not an agency employee, at no cost to the family or recipient.</p>
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<u>Residential Habilitation</u>	The direct care staff person is an employee of the qualified provider contracting with the Department.	N/A	N/A	The service requirements outlined in ARM 37.34.937 and 37.34.938 shall apply. The staffing rule as outlined in ARM 37.34.2107 will apply. The DDP QIS (QMRP) will verify the individual has received training within 30 days of hire including: abuse reporting, incident reporting, client rights, client confidentiality and first aid training, CPR training and any specialty training relating to the need of individual served, as outlined in the plan of care. Persons assisting with meds will be certified according to rule. In addition, the employer will maintain documentation verifying the person providing direct client services has an acceptable criminal background check. Persons providing residential habilitation may be sixteen or seventeen years of age if the service is provided under direct adult supervision and all other requirements are met.
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<u>Day Habilitation</u>	The direct care staff person is an employee of the qualified provider contracting with the department.	N/A	N/A	The service requirements outlined in ARM 37.34.937 and 37.34.938 shall apply. The staffing rule as outlined in ARM 37.34.2107 will apply. The DDP QIS (QMRP) will verify the individual has received training within 30 days of hire including: abuse reporting, incident reporting, client rights, client confidentiality and first aid training, CPR training and any specialty training relating to the need of individual served, as outlined in the plan of care. Persons assisting with meds will be certified according to rule. In addition, the employer will maintain documentation verifying the person providing direct client services has an acceptable criminal background check. Persons providing day habilitation may be sixteen years or seventeen years of age if the service is provided under direct adult supervision and all other requirements are met.
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<u>Supported Employment</u>	The direct care staff person is an employee of the qualified provider contracting with the Department.	N/A	N/A	The service requirements outlined in ARM 37.34.937 and 37.34.938 shall apply. The staffing rule as outlined in ARM 37.34.2107 will apply. The DDP QIS (QMRP) will verify the individual has received training within 30 days of hire including: abuse reporting, incident reporting, client rights, client confidentiality and first aid training, CPR training and any specialty training relating to the need of individual served, as outlined in the plan of care. Persons assisting with meds will be certified according to rule. In addition, the employer will maintain documentation verifying the person providing direct client services has an acceptable criminal background check.
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<u>Environmental Modifications</u>	The individual(s) performing the work and purchasing materials may or may not be an employee of the contracting agency. The individual(s) performing the work will be paid by the agency contracting with the Department.	N/A	N/A	ARM 37.34.960 and 37.34.961
<u>Adaptive Equipment</u>	Goods and services purchased from a legal entity or enrolled Medicaid provider offering these goods and services. Funds will be paid by the Department to a qualified provider, who will reimburse the adaptive equipment vendor for goods and services provided to the recipient.	N/A	N/A	ARM 37.34.962 and 37.34.963 for services not available under the State Plan.

<u>Private Duty Nursing</u>	The nurse may or may not be an employee of the qualified provider agency. The nurse services will be reimbursed by an agency under contract with the Department.	LPN or RN, licensed and/or registered to practice in the State of Montana and certified in accordance with MCA 37-8-101 through 37-8-444	N/A	ARM 37.34.973, 37.34.974. Private duty nursing services are delivered in accordance with the orders of the physician, and documented in the plan of care.
<u>Transportation</u>	The transportation provider will be an employee of the qualified provider agency or an employee of an enrolled Medicaid provider, or a person who meets the service standards who has a written agreement with a provider designated as an OHCDs by the Department.	Persons providing transportation must be licensed to operate a motor vehicle and otherwise meet the requirements set forth in ARM 37.34.968. Escort services are disallowed as a transportation expense.		ARM 37.34.967 and 37.34.968. Payment for escort services shall not be made under the category of transportation.
<u>Family Support Coordination</u>	Family Support Coordination will be provided by Family Support Specialists (FSS). These staff are employees of qualified provider agencies under contract with the Department.	N/A	FSSs must be certified in accordance with the Department rule governing FSS certification.	ARM 37.34.2106 ARM 37.34.925 ARM 37.34.926

<u>Physical Therapy Services</u>	Enrolled Medicaid provider	Licensed according to MCA 37-11-301 through 37-11-322		ARM 37.34.954 ARM 37.34.955
<u>Occupational Therapy Services</u>	Enrolled Medicaid provider	Licensed according to MCA 37-24-101 through 37-24-311		ARM 37.34.950 ARM 37.34.951
<u>Speech Therapy Services</u>	Enrolled Medicaid provider	Licensed speech pathologist according to MCA 37-15-101 through 37-15-323		ARM 37.34.956 ARM 37.34.957
<u>Psychological Services</u>	Enrolled Medicaid provider	Licensed psychologist according to MCA 37-17-101 through 37-17-318		ARM 37.88.601 ARM 37.34.971 ARM 37.34.972
<u>Dietician Services</u>	Enrolled Medicaid provider	Licensed nutritionist (MCA 37-25-101 through 37-25-308) or dietician (MCA according to MCA 37-21-101 through 37-21-302)		ARM 37.34.978 ARM 37.34.979
<u>Meals Services</u>	Enrolled Medicaid Provider Licensed to Deliver Meals	Program authorized as outlined in 42 USC 3030e Subpart 2, Sections 336 and 337		ARM 37.34.980 ARM 37.34.981

<u>Respiratory Services</u>	Enrolled Medicaid Provider	Licensed respiratory care practitioner (MCA 37-28- 101 through 37-28-305)		ARM 37.34.987 ARM 37.34.988
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## B. ASSURANCE THAT REQUIREMENTS ARE MET

The State assures that the standards of any State licensure or certification requirements are met for services or for individuals furnishing services provided under the waiver.

## C. PROVIDER REQUIREMENTS APPLICABLE TO EACH SERVICE

For each service for which standards other than, or in addition to State licensure or certification must be met by providers, the applicable educational, professional, or other standards for service provision or for service providers are attached to this Appendix, tabbed and labeled with the name of the service(s) to which they apply.

When the qualifications of providers are set forth in State or Federal law or regulation, it is not necessary to provide copies of the applicable documents. However, the documents must be on file with the State Medicaid agency, and the licensure and certification chart at the head of this Appendix must contain the precise citation indicating where the standards may be found.

## D. FREEDOM OF CHOICE

The State assures that each individual found eligible for the waiver will be given free choice of all qualified providers of each service included in his or her written plan of care.



## APPENDIX B-3

### KEYS AMENDMENT STANDARDS FOR BOARD AND CARE FACILITIES

#### KEYS AMENDMENT ASSURANCE:

The State assures that all facilities covered by section 1616(e) of the Social Security Act, in which home and community-based services will be provided, are in compliance with applicable State standards that meet the requirements of 45 CFR Part 1397 for board and care facilities.

#### APPLICABILITY OF KEYS AMENDMENT STANDARDS:

Check one:

☐ Home and community-based services will not be provided in facilities covered by section 1616(e) of the Social Security Act. Therefore, no standards are provided.

☒ A copy of the standards applicable to each type of facility identified above is maintained by the Medicaid agency.